## UNITED STATES PATENT & TRADEMARK OFFICE Washington, D.C. 20231

REQUEST FOR PATENT FEE REFUND					
1 Date of Request: 10748,903 2 Serial/Patent # 8/404					
3 Please refund the following fee(s):		4 PAP NUM		5 DATE FILED	6 AMOUNT
	Filing				\$
	Amendment				\$
	Extension of Time				\$
	Notice of Appeal/Appeal			j	\$
X	Petition			7/6/04	\$ 130.00
	Issue		**	, ,	\$
	Cert of Correction/Terminal Disc.				\$
	Maintenance		, ,		\$
	Assignment				\$
	Other				\$
		7 TOTAL AMOUNT OF REFUND			\$ 00
		8 TO BE REFUNDED BY:			
10 REASON:		Treasury Check			
ž.	Overpayment	X	С	redit Dep	osit A/C #:
	Duplicate Payment		9		1679
X	No Fee Due (Explanation):	<u></u>			
method or mores claims present,					
DRAWINGS NOT NECESSARY					
11 REFUND REQUESTED BY:					
TYPED/PRINTED NAME: - CATOCIA FARON- tall TITLE: Attorney					
SIGNATURE: January and Ball PHONE: 305 4497					
office: <u>Pertions</u>					
THIS SPACE RESERVED FOR FINANCE USE ONLY:					
APPROVED: (Mala Mell) DATE: \$15/89					

Instructions for completion of this form appear on the back. After completion, attach white and yellow copies to the official/file and mail or hand-carry to:

Office of Finance Refund Branch Crystal Park One, Room 802B

PORM PTO 1577 (01/90)